

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
N. B. In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

State File No. 167  
Registered No. 210

1. PLACE OF BIRTH

County Gila State Arizona  
District or Township \_\_\_\_\_ or Village \_\_\_\_\_  
City Miami No. Miami Insp. Hospital Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Betty June Holt

{ If child is not yet named, make supplemental report, as directed.

3. Sex of Child

Female

To be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other

5. No., in order of birth

6. Legitimate?

yes

7. Date

Apr. 20-1929  
Month Day Year

8.

FATHER

Full name

Hurl Holt

9. Residence

(Usual place of abode)

Miami,

If non-resident, give place and state.

Arizona.

10. Color or race

Cauc.

11. Age at last birthday 23 (Years)

12. Birthplace (city or place)

Nolan,

(State or country)

Texas

13. Occupation

Nature of industry

B  
Mining

14.

MOTHER

Full maiden name

Alma B. George

15. Residence

(Usual place of abode)

Miami,

If non-resident, give place and state.

Arizona.

16. Color or race

Cauc.

17. Age at last birthday 18 (Years)

18. Birthplace (city or place)

Blackwell,

(State or country)

Texas

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against ophthalmia neonatorum?

yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was born alive at 5 A. m. on the date above stated.  
(Born alive or stillborn.)

Signature

Byrle M. Brown M.D.

Physician

(Physician or midwife)

Address

Miami, Arizona

Filed

May 13, 29

H. E. Brown

Registrar

Registrar

\* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report

Month, day, year

283-420-175